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Childhood trauma is associated with maladaptive personality traits



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ABSTRACT

The association between childhood trauma and personality traits has been poorly characterized and reported. Our aim was to evaluate whether distinct types of childhood abuse and neglect are associated with various personality dimensions using data from a large webbased survey. A total of 12,225 volunteers responded anonymously to the Internet versions of the Temperament and Character Inventory-Revised (TCI-R) and the Childhood Trauma Questionnaire (CTQ) via our research website, but only 8,114 subjects (75.7% women, mean age 34.8 \pm 11.3 yrs) who met the criteria for validity were included in the analysis. Childhood trauma was positively associated with harm avoidance and was negatively associated with self-directedness and, to a lesser extent, with cooperativeness. The associations were robust with emotional abuse and neglect but were non-significant or mild with physical trauma. Emotional neglect was associated with reduced reward dependence and persistence. All types of abuse, but not neglect, were associated with increased novelty seeking scores. Reporting of childhood trauma, especially of an emotional nature, was associated with maladaptive personality traits. Further investigation of the effects of different types of childhood trauma on psychological and neurobiological parameters is warranted.

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Introduction

Traumatic childhood experiences are derived from noxious actions or events inflicted on the child and from the lack of a supporting environment. Early traumatic events have been widely recognized as key factors in psychological adjustment that can compromise a child's development (Allen & Lauterbach, 2007; Franklin, Linder, Russig, Thony, & Mansuy, 2011; Rademaker, Vermetten, Geuze, Muilwijk, & Kleber, 2008). Studies of child abuse and neglect have increased significantly (Cicchetti & Toth, 2005), which are primarily focused on the association between childhood trauma and psychiatric disorders, including mood disorders (Weiss, Longhurst, & Mazure, 1999; Widom, DuMont, & Czaja, 2007; Wingo et al., 2010), substance abuse (Conroy, Degenhardt, Mattick, & Nelson, 2009; Tucci, Kerr-Correa, & Souza-Formigoni, 2010), psychosis (Heins et al., 2011), posttraumatic stress disorder (Koenen, Moffitt, Poulton, Martin, & Caspi, 2007; Vranceanu, Hobfoll, & Johnson, 2007), eating disorders (Kong & Bernstein, 2009), personality disorders (Afifi et al., 2011), suicidality (Pompili et al., 2009), and the

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decreased response to psychopharmacological interventions (Nemeroff et al., 2003). Nevertheless, studies of the association between childhood trauma and psychological traits are scarce (Rademaker et al., 2008).

The scarcity of trait—trauma relationship studies may be due to clinical and conceptual reasons. In clinical practice, patients with a traumatic history are a common occurrence, leading to an intrinsic association between trauma and maladjustment and to the aforementioned research emphases on the association between trauma and psychopathology. From a conceptual perspective, it may appear to be of minor importance to examine the relationships between traits and trauma if temperament and personality are conceptualized as domains in a normal range of individual differences (Mathews, Deary, & Whiteman, 2003) Additionally, temperament and personality traits are believed to be largely inherited (Cloninger, 1994), which may lead to the false assumption that trait manifestation was programmed before any experience of abuse or negligence occurred. Nevertheless, the results relating trauma to traits have demonstrated heuristic power.

Allen and Lauterbach (2007) found that individuals with traumatic lifetime experiences display higher scores in neuroticism and openness to experience than controls. Rademaker et al. (2008) found significant negative associations between traumatic events and trait self-directedness and cooperativeness in a military sample. Other studies have described the potentially detrimental effects of early trauma on personality-related outcomes, such as identity development, socialization (Cole & Putnam, 1992), self-esteem, coping behaviour (Toker, Tiryaki, Ozcurumez, & Iskender, 2011), impulse control, defensive styles, affect regulation and the formation of stable attachments (Cicchetti & Toth, 2005; Rademaker et al., 2008). This evidence suggests that traumatic events influence not only psychopathology but also psychological traits.

One limitation warrants noting: most studies that focus on the relationships between trauma and psychological or psychiatric characteristics were conducted using classic face-to-face interviews or paper-and-pencil questionnaires. The participant may feel exposed when communicating directly with research staff or by assuming that he or she could be somehow identified. Alternatively, evidence suggests that Internet-based data collection is more reliable than face-to-face interviews, paper-and-pencil anonymous instruments and telephone interviews (Birnbaum, 2004; Couper, 2000) for sensitive issues such as illicit drug use, sexual behaviour and violence (Turner et al., 1998). However, to the best of our knowledge, no published study has examined the relationship between traits and childhood trauma using collected data via a web-based survey.

Thus, the objective of this Internet-based study was to evaluate the association between personality traits and childhood trauma, with an emphasis on the differences related to the severity (none, low, moderate and severe) and type of trauma: physical trauma, emotional trauma, physical neglect, emotional neglect, and sexual abuse. We hypothesized that individuals who reported more severe adversities during childhood would exhibit a personality profile displaying greater proneness to general maladjustment, such as higher scores in harm avoidance and lower scores in self-directness (de la Rie, Duijsens, & Cloninger, 1998; Rademaker et al., 2008).

Methods

Participants and Procedures

Along with other instruments, participants responded to the Internet versions of the Temperament and Character Inventory-Revised (TCI-R, Cloninger, Svrakic, & Przybeck, 1993) and the Child Trauma Questionnaire (CTQ, Bernstein et al., 1994; Bernstein et al., 2003) via our research website (www.temperamento.com.br) in this order. National TV and local newspaper broadcasts motivated participation by reporting preliminary results of individual differences in temperament and by clarifying that this website offers a summary of results (a psychological profile) in exchange for participation as soon as the participant finishes responding to the survey. Electronically informed consent forms were obtained from the participants before completing the assessments. This form was designed to fulfil the requirements of the National Health Council of Brazil (Resolution 196/1996) and the Code of Ethics of the World Medical Association (Declaration of Helsinki). The study protocol was approved by the Institutional Review Board of the Hospital São Lucas at Pontificia Universidade Catolica do Rio Grande do Sul. A complete description of the study protocol is available elsewhere (Lara et al., 2012).

To participate in the current study, the respondents had to be aged between 18 and 80 years and had to respond correctly to the validity assessments available on the website. The validity assessments aimed to determine the respondent's level of attention and involvement by asking the participant to select a certain item (i.e., check option c) and by evaluating via self-report the level of involvement and truthfulness in responding. A total of 12,225 participants completed the survey, but 4,111 were excluded due to the validity assessment responses. Table 1 shows and compares the demographic characteristics and the prevalence of trauma/neglect variables for the included and excluded participants.

As shown in Table 1, the resulting sample was composed of 8,114 adult men (1,970, 24.3%) and women (6,144, 75.7%) with a mean age of 34.84 years (SD = 11.37) and who were well educated: 41% completed high school, and 54.4% held a college degree. Half of the participants reported previous use of a psychotropic treatment of any type (50.4%), while 32.5% reported having been diagnosed with a mental disorder at least once in their lives. The most common types of trauma in the moderate–severe range were emotional neglect (28.6%) and abuse (27.5%), followed by physical abuse (18.2%), physical neglect (17.2%), and sexual abuse (14.9%). Additionally, in the moderate–severe range, 165 (2%) participants declared to have been victimized in all assessed modalities of abuse and neglect. Women reported significantly higher prevalence of emotional (30.4%, x^2 = 128.76, p < 0.001) and sexual abuse (15.7%, x^2 = 15.99, p < 0.001) than men (18.5% and 12.4%). The excluded participants (due to the validity assessments) exhibited a less favourable profile than the included participants,

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